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FACSIMILE TRANSMISSION

CONFIDENTIAL

DATE: December 15, 2005   CLIENT-MATTER No.: 23540-10616US

TO:

NAME	FAX NO.	PHONE NO.
U. S. PTO Central Facsimile Number	1 -571-273-8300	

FROM: Michael J. Shuster   PHONE: (415) 875-2413

SENT BY: Tomika Thomas   PHONE: (415) 875-2474

RE: U.S. APPLN. NO.: 09/927,315

NUMBER OF PAGES WITH COVER PAGE: 48	ORIGINAL WILL NOT FOLLOW

MESSAGE:

Amendment Response &
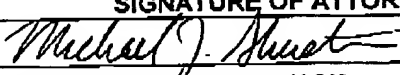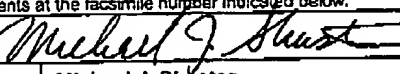Information Disclosure Statement

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+

TRANSMITTAL FORM	Application Number	09/927,315
	Filing Date	August 10, 2001
(to be used for all correspondence during pendency of filed application)	First Named Inventor	Zuker et al.
	Group Art Unit Number	1646
	Examiner Name	Michael T. Brannock, Ph.D.
Total Number of Pages in This Submission 47	Attorney Docket Number	23540-10616 (2001-510-1)

ENCLOSURES *(check all that apply)*

☒ Fee Transmittal Form (in duplicate)
    ☐ Check Enclosed
☐ Return Receipt Postcard
☐ Response to Notice to File Missing Parts
☐ Assignment & Recordation Cover Sheet
☐ Declaration
☐ Power of Attorney
☐ Application Data Sheet
☒ Information Disclosure Statement & PTO/SB/08A
    ☒ Copies of IDS Cited References
☐ Request for Corrected Filing Receipt
☐ Request for Correction of Recorded Assignment
☒ Amendment/Response: [21] Page(s)
    ☒ After Final
☐ Status Request
☐ Revocation and Substitute Power of Attorney

☐ Issue Fee Transmittal
☐ Letter to Chief Draftsperson
☐ Formal Drawing(s):
    [ ] Sheet(s) of Figure(s) [ ]
☐ Appeal Communication to Board of Appeals and Interferences
☐ Appeal Communication to Group
    (Appeal Notice, Brief, Reply Brief)
☐ Certified Copy of Priority Document(s)
☐ After Allowance Communication to Group
☐ _____
☐ _____
☐ _____
☐ _____
☐ _____
☐ _____
☐ _____

REMARKS:

SIGNATURE OF ATTORNEY OR AGENT

Signature:	*[signature]*		
Attorney/Reg. No.:	Michael J. Shuster Reg. No.: 41,310	Dated:	December 15, 2005

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below.

Signature:	*[signature]*		
Typed or Printed Name:	Michael J. Shuster	Dated:	December 15, 2005
Facsimile Number:	1-571-273-8300		

23540/10616/SF/5157374.1

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FEE TRANSMITTAL
for FY 2005

Patent fees are subject to annual revision.

Complete if Known	
Application Number	09/927,315
Filing Date	August 10, 2001
First Named Inventor	Zuker et al.
Examiner Name	Michael T. Brannock, Ph.D.
Art Unit	1646

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT   ($) 180.00

Attorney Docket No.   23540-10616 (2001-610-1)

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None
☒ Deposit Account

Deposit Account Number   19-2555

Deposit Account Name   Fenwick & West LLP

The Commissioner is authorized to: *(check all that apply)*

☒ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity			
Fee Code	Fee ($)	Fee Code	Fee ($)	Fee Description	Fee Paid

SUBTOTAL (1)   ($)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	-20**	x	=
Independent Claims	-3**	x	=
Multiple Dependent			=

Large Entity		Small Entity			
Fee Code	Fee ($)	Fee Code	Fee ($)	Fee Description	
1202	50	2202	25	Claims in excess of 20	
1201	200	2201	100	Independent claims in excess of 3	
1203	360	2203	180	Multiple dependent claim, if not paid	
1204	200	2204	100	**Reissue independent claims over original patent	
1205	50	2205	25	**Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)   ($)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee ($)	Fee Code	Fee ($)		
1051	130	2051	65	Surcharge - late filing fee or oath or declaration	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1000	2403	500	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	500	2452	250	Petition to revive - unavoidable	
1453	1,500	2453	750	Petition to revive - unintentional	
1501	1,400	2501	700	Utility issue fee (or reissue)	
1502	800	2502	400	Design issue fee	
1503	1100	2503	550	Plant issue fee	
1460	—	1460	—	Petitions to the Director	
1807	50	1807	50	Processing fee for Provisional Applications	
1806	180	1806	180	Submission of Information Disclosure Stmt	180.00
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR 1.129(b))	
1801	790	2801	395	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)_____

SUBTOTAL (3)   ($) 180.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY			Complete (if applicable)	
Name (Print/Type)	Michael J. Shuster	Registration No. (Attorney/Agent)	41,310	Telephone (415) 875-2413
Signature	*Michael J. Shuster*		Date	December 15, 2005